

MICHIGAN DEPARTMENT OF AGRICULTURE
FOOD AND DAIRY DIVISION
DAIRY SECTION
P.O. BOX 30017
LANSING, MI 48909

DY-307 (Rev. 01/2002)

GRADE A FACILITY LICENSE APPLICATION

(In accordance with the provisions of Act 266, PA 2001 or Act 267, PA 2001)

FOR DEPARTMENT USE ONLY

LICENSE #

DATE PRINTED

EXPIRATION DATE

- ☐ Transfer Station (No milk storage facilities)
- ☐ Receiving Station (Has milk storage facilities)
- ☐ Tank Truck Cleaning Facility (With no transfer or receiving facilities)
- ☐ Milk Distributor (Distribution facilities used primarily for Grade A milk products)
- ☐ Single Service Product Manufacturer— Products Produced _____

NAME OF PLANT COMPLEX		<input type="checkbox"/> RAL ID NO. <input type="checkbox"/>	
FACILITY NAME		NEW RENEWAL	STATE I.D. # 26 -
STREET/ROAD ADDRESS		TELEPHONE ()	
CITY	ZIP CODE	FAX ()	
LICENSEE / OWNER(S) / PRINCIPAL STOCK HOLDERS OWNING IN EXCESS OF 35% OF STOCK:		COUNTY	FISCAL YEAR END (Mo./Day)
1. _____	3. _____		
2. _____	4. _____		
FEE DETERMINATION (Complete the sections below which describe your operation)			AMOUNT
\$50.00	For each STAND ALONE FACILITY		\$50.00
Make remittance payable to State of Michigan Send check or money order – Do Not Mail Cash			TOTAL \$
The above information is provided for the purposes of obtaining a license under Act 266, PA 2001 or Act 267, PA 2001. I certify that, to the best of my knowledge, this information is true. (Signed) AUTHORIZED AGENT		TITLE	DATE

MICHIGAN DEPARTMENT OF AGRICULTURE - AUTHORIZED AGENT:	TITLE	DATE